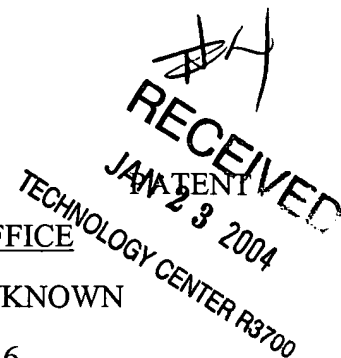




10/066,967

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: KNUDSON ET AL. Examiner: UNKNOWN
Serial No.: 10/066,967 Group Art Unit: 3736
Filed: FEBRUARY 4, 2002 Docket No.: 13033.5US01
Title: PHARYNGEAL WALL TREATMENT



CERTIFICATE UNDER 37 CFR 1.8:

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, with sufficient postage, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on January 14, 2004.

By: Carla J. Mauch
Name: Carla J. Mauch

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT (37 C.F.R. § 1.97(b))

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

With regard to the above-identified application, the items of information listed on the enclosed Form 1449 are brought to the attention of the Examiner.

This statement should be considered because it is submitted before the mailing date of a first Office Action on-the-merits. Accordingly, no fee is due for consideration of the items listed on the enclosed Form 1449.

In accordance with 37 C.F.R. §1.98(a)(2), a copy of each document or other information listed on the enclosed Form 1449 is provided.

No representation is made that a reference is "prior art" within the meaning of 35 U.S.C. §§ 102 and 103 and Applicants reserve the right, pursuant to 37 C.F.R. § 1.131 or otherwise, to establish that the reference(s) are not "prior art." Moreover, Applicants do not represent that a reference has been thoroughly reviewed or that any relevance of any portion of a reference is intended.

Consideration of the items listed is respectfully requested. Pursuant to the provisions of M.P.E.P. 609, it is requested that the Examiner return a copy of the attached Form 1449, marked

as being considered and initialed by the Examiner, to the undersigned with the next official communication.

Please charge any additional fees or credit any overpayment to Deposit Account No. 13-2725.



Date: Jan. 14, 2004

Respectfully submitted,

MERCHANT & GOULD P.C.
P.O. Box 2903
Minneapolis, Minnesota 55402-0903
(612) 332-5300

Karen A. Fitzsimmons
Karen A. Fitzsimmons
Reg. No. 50,470
KAF:cjm

FORM 1449*

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

IN AN APPLICATION

(Use several sheets if necessary)

Docket Number:

13033.5US01

Application Number:

10/066,967

Applicant: KNUDSON ET AL.

Filing Date: FEBRUARY 4,
2002

Group Art Unit: 3736

U.S. PATENT DOCUMENTS

EXAMINER INITIAL	DOCUMENT NO.	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE

RECEIVED
JAN 23 2004
TECHNOLOGY CENTER R3700

FOREIGN PATENT DOCUMENTS

	DOCUMENT NO.	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION	
						YES	NO
	44 12 190 A1	10/12/1995	DE			X	

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, Etc.)

		Blumen et al., Radiofrequency Ablation for the Treatment of Mild to Moderate Obstructive Sleep Apnea, November, 2002; pages 2086-2092.

23552

PATENT TRADEMARK OFFICE

EXAMINER

DATE CONSIDERED

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; draw line through citation if not in conformance and not considered. Include copy of this form for next communication to the Applicant.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: KNUDSON ET AL. Examiner: UNKNOWN
Serial No.: 10/066,967 Group Art Unit: 3736
Filed: FEBRUARY 4, 2002 Docket: 13033.5US01
Confirmation No.: 4691
Title: PHARYNGEAL WALL TREATMENT

RECEIVED
JAN 23 2004
TECHNOLOGY CENTER R3700

CERTIFICATE UNDER 37 CFR 1.8:

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, with sufficient postage, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on January 14, 2004.

By: Carla J. Mauch
Name: Carla J. Mauch

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

23552

PATENT TRADEMARK OFFICE

Sir:

We are transmitting herewith the attached:

- ☒ Transmittal Sheet in duplicate containing Certificate of Mailing
- ☒ Supplemental Information Disclosure Statement, Form 1449, 2 Reference(s)
- ☒ Return postcard

Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers or any future reply, if appropriate. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. A duplicate of this sheet is enclosed.

MERCHANT & GOULD P.C.
P.O. Box 2903, Minneapolis, MN 55402-0903
612.332.5300

By: Karen A. Fitzsimmons
Name: Karen A. Fitzsimmons
Reg. No.: 50,470
KFitzsimmons/cjm